

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			3/7/51
FORMALITY REVIEW	✓	1019	03-16-01
RESPONSE FORMALITY REVIEW			

JZ 5/10/9

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 — (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Date		
Final	11	04	12/07
Original	11	05	11/10
1	01	02	02/17
2	✓	✓	✓
3	✓	✓	
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23			
24			
25	✓	✓	✓
26	✓	✓	✓
27	✓	✓	✓
28	✓	✓	✓
29	✓	✓	✓
30	✓	✓	✓
31	✓	✓	✓
32	✓	✓	✓
33	✓	✓	✓
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45			
46			
47			
48	✓	✓	✓
49	✓	✓	✓
50	✓	✓	✓

Claim	Date		
Final	51		
Original	52		
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Claim	Date		
Final	101		
Original	102		
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If more than 150 claims or 10 actions  
staple additional sheet here

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